

# STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

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I Name of Lobbyis	et(s) Susan H. Paschell ; James P. Monahan		AUG 0 1 2017
II. Name of lobbyist's partnership, firm or corporation, if any:			NEW HAMPSHIRE DEPARTMENT OF STATE
The Dupont Group			
(Name of partnership, fir			
114 N N N - 1 - C4 C - 2	4- 404 C J BITT 02201		
Business Address: (Street	te 401 Concord, NH 03301 () (Town/City) (State) (Zip Code)		
( (	, (10 mb 11), (2 mb, (2 p 10 2 )		
(603)228-3322		-mail <u>jmonahan@du</u> j	oontgroup.com
(Telephone)	(Fax)		
	covers: (Choose one – file separate reports for each swhich are not attributable to any one client).	h client, OR you may f	ile a separate report for reportable
All reportable	transactions occurring in the month prior to the report	ting date relative to the	following client:
Community Behav	ioral Health Association		
O.D.	(Full Name of Client as it appears on the L	obbyist Registration Form)	
<u>OR</u>			
All reportable tra to any particular clie	ansactions by the lobbyist (including the lobbyist's fa	mily), or the lobbying fi	rm listed below which are unrelated
IV. Date of Report Reports cover	April 26, 2017 X  activity from date of registration to 3/31/17	July 26 activity from 4/1	5, 2017 □ /17 <b>to 6/30/</b> 17
	October 25, 2017 activity from 7/1/17 to 9/30/17	January activity from 10	31, 2018
	no fees received and no reportable transactions nd, complete just this form and submit it to the Secreta.		
VI. Check if addition	onal reports are attached: ived fees or made expenditures, you must file Addend	um A- Fees and Expen	ses
If you have paid Reimbursement	an honorarium or reimbursed expenses, you must file	Addendum B- Report	of Honorariums or Expense
☐ If you, your firm	, or your family has made political contributions, you	must file Addendum C	- Political Contributions.
Sworn Statement/A I have read RSA 15, best of my knowled	Affirmation by Lobbyist , RSA 15-B and RSA 664 and hereby swear or affirm ge and belief.	that the foregoing infor	mation is true and complete to the
purant.	Paschell		
		<u>4/26/20</u>	017
(Signature of lobbyist)		(Date)	
Susan H. Paschell (Print Name of lobbyist)			



## STATE OF NEW HAMPSHIRE Lobbyist Fees and Expenses Addendum A

(RSA Chapter 15:6

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	
Susan H. Paschell ; James P. Monahan	<del></del>
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Dupont Group	
(Name of partnership, firm or corporation)	
III. Name of Client Community Behavioral Health Association	Date 4/26/2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above t including fees for services such as public advocacy, government relations, or p legislation, and related legal work. The gross fee amount reported shall not be a	ublic relations services including research, monitoring
a) Total of all fees received in this reporting period	a) \$12000
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) <b>\$0</b>
c) Total of all fees received to date (Add lines a and b)	c)\$12000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) <b>\$0</b>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report reports are to be filed for expenditures made relative to each client and if expert unrelated to any one client a separate report may be filed for the lobbyist(s)/firmal categories of expenses: (a) the aggregate total of all expenses paid during the result of the expenses; (b) the aggregate total of all individual expenses where the experimentary purchased during a business lunch where the cost was \$25.00 or less, purchase the person being lobbied, purchase of a ceremonial object given to a person being itemized statement of each individual expenditure made during this reporting provered by (a) (for example: purchase of a meal with value of greater than \$25 subject of lobbying with a value greater than \$25, but not greater than \$50, rest for honorariums, expense reimbursement, or political contributions will be reported and the province of the province	nditures are made by the lobbyist(s)/firm that are m. Expenses are to be reported in one of three eporting period for salaries, benefits, support staff, and penditure was of \$25.00 or less (for example: meals of a pen with a value of less than \$10 that is given to ing lobbied with a value of \$25.00 or less); and (c) an eriod of greater than \$25.00 for any purpose not purchase of a ceremonial object to be given to the laurant expenses for a legislative reception). Expenses
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$
d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from lead whom paid or to whom charged.	obbying fees during this reporting period, including b
Paid to: Amount:	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the best of my knowledge and belief.  Juan H. Faschell	
,	
(Signature of lobbyist) 4/26/2 (Date)	017
Susan H. Paschell (Print Name of lobbyist)	

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### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

AUG 0 1 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:					
Name of Lobbying partnership, firm, or corporation: The Dupont Group					
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular					
client): Community Behavioral Health Association					
Date of Report (check one):					
April 26, 2017 X July 26, 2017 🗌 October 25, 2017 🗎 January 31, 2018 🔲					
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):					
Addendum A(s).					
<u>0</u> Addendum B(s).					
<u>0</u> Addendum C(s).					
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.					
of the					
(Signature of lobbyist) $\frac{4/26/2017}{\text{(Date)}}$					
James P. Monahan (Print Name of Johnvist)					